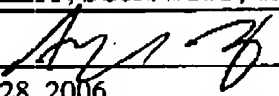
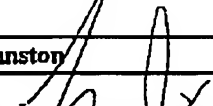


TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	10/038,076
		Filing Date	January 2, 2002
		First Named Inventor	Allen D. Feller
		Art Unit	1714
		Examiner Name	Toomer, Cepha D.
Total Number of Pages in This Submission	11	Attorney Docket Number	42390P9433

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ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 60px; width: 150px; margin-top: 10px;"></div>
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Angelo J. Gaz, Reg. No. 45,907 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP	
Signature		
Date	April 28, 2006	

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Suzanne Johnston		
Signature		Date	April 28, 2006

Based on PTO/SB/21 (09-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/1) 1/30/2005.
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

**FEE TRANSMITTAL
for FY 2005**

Patent fees are subject to annual revision.

Complete if Known

Application Number	10/038,076	RECEIVED
Filing Date	January 2, 2002	CENTRAL FAX CENTER
First Named Inventor	Allen D. Feller	
Examiner Name	Toomer, Cepha D.	APR 28 2006
Art Unit	1714	
Attorney Docket No.	42390P9433	

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

0.00

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit card ☐ Money Order ☒ None ☐ Other (please identify):☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.☒ Credit any overpayments**FEE CALCULATION****1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
18	0	50.00	\$0.00
3	0	200.00	\$0.00
Multiple Dependent			

Large Entity**Small Entity**

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	350	2203	180	Multiple Dependent claim, if not paid
1204	780	2204	395	**Reissue independent claims over original patent
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (1)

(\$)

0.00

*or number previously paid, if greater. For Reissues, see below

2. ADDITIONAL FEES**Large Entity****Small Entity**

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet
2053	130	2053	130	Non-English specification
1251	120	2251	60	Extension for reply within first month
1252	450	2252	225	Extension for reply within second month
1253	1,020	2253	510	Extension for reply within third month
1254	1,580	2254	795	Extension for reply within fourth month
1255	2,160	2255	1,080	Extension for reply within fifth month
1401	500	2401	250	Notice of Appeal
1402	500	2402	250	Filing a brief in support of an appeal
1403	1,000	2403	500	Request for oral hearing
1451	1,510	2451	1,510	Petition to institute a public use proceeding
1450	130	2450	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(e)
1806	180	1806	180	Submission of Information Disclosure Stmt
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify)

SUBTOTAL (2)

(\$)

Fee Paid**SUBMITTED BY**

Complete (if applicable)

Name (Print/Type)	Angelo J. Gaz	Registration No. (Attorney/Agent)	45,907	Telephone	(310) 207-3800
Signature		Date	04/28/06		

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/12/16/2004).
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FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 0.00

Complete if Known

Application Number 10/038,076
Filing Date January 2, 2002
First Named Inventor Allen D. Feller
Examiner Name Toomer, Cepha D.
Art Unit 1714
Attorney Docket No. 42390P9433

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☒ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) ☒ Credit any overpayments
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION

1. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
18	20*	0	50.00
Independent Claims	3	0	200.00
Multiple Dependent			

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	350	2203	180	Multiple Dependent claim, if not paid
1204	790	2204	395	**Reissue independent claims over original patent
1205	300	2205	180	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (1)				(\$)
				0.00

*or number previously paid, if greater. For Reissues, see below

2. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1061	130	2051	65	Surcharge - late filing fee or oath
1062	50	2052	25	Surcharge - late provisional filing fee or cover sheet
2053	130	2053	130	Non-English specification
1251	120	2251	60	Extension for reply within first month
1252	450	2252	225	Extension for reply within second month
1253	1,020	2253	510	Extension for reply within third month
1254	1,590	2254	795	Extension for reply within fourth month
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1401	500	2401	250	Notice of Appeal
1402	500	2402	250	Filing a brief in support of an appeal
1403	1,000	2403	500	Request for oral hearing
1451	1,510	2451	1,510	Petition to Institute a public use proceeding
1460	130	2460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(a)
1806	180	1806	180	Submission of Information Disclosure Stmt.
1809	730	1809	395	Filing a submission after final rejection (37 CFR § 1.128(a))
1810	700	2810	395	For each additional invention to be examined (37 CFR § 1.128(b))

Other fee (specify)

SUBTOTAL (2)

(\$)

SUBMITTED BY

Name (Print/Type) Angelo J. Gaz

Registration No. (Attorney/Agent)

45,907

Telephone

(310) 207-3800

Signature

Date

04/28/06

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (MPL 12/15/2004).
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**REPLY UNDER 37 CFR 1.116
EXPEDITED PROCEDURE
TECHNOLOGY CENTER 1700**

Attorney's Docket No. 042390.P9433

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Allen D. Feller, et. al.

Application No. 10/038,076

Filed: **January 2, 2002**

For: **METHOD OF IMPROVING
CHEMICAL MECHANICAL POLISH
ENDPOINT SIGNALS BY USE OF
CHEMICAL ADDITIVES**

Examiner: **Toomer, Cephia D.**

Art Unit: **1714**

Confirmation No.: **7335**

RESPONSE TO FINAL OFFICE ACTION

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Dear Sir or Madam:

In response to the Final Office Action mailed January 30, 2006, Applicants respectfully request consideration of the following remarks.